

Senate Majority Committee Clerks

From: handerson64@charter.net
Sent: Tuesday, January 26, 2016 11:17 AM
To: Senate Majority Committee Clerks
Subject: Senate Insurance Committee Bill 625

Ms Mosher,

As a cancer patient, I have a strong interest in SB625 being passed to ensure we cancer patients have access to the most effective treatment regardless of whether it is oral, IV or injected.

I understand a hearing of the Senate Insurance Committee is scheduled for Wednesday, January 27, to consider SB625. If there would be an opportunity for me to testify, I would be interested in attending this hearing. If you could advise me of the schedule, I would like to arrange to be there.

In any case, please note my strong support for this legislation.

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Michigan Senate Insurance Committee Hearing
Testimony on SB625 re Cancer Drug Parity

My name is Harold Anderson. I am a retired Navy Captain. I grew up in Michigan, served on active duty in the U.S. Navy for 31 years, and came back home to Michigan after I retired.

In 1998, I was diagnosed with multiple myeloma, cancer of the bone marrow plasma cells when the average life expectancy was 2-3 years. I had eight rounds of a combination of two IV drugs and one oral drug, which was the best available therapy at that time. I then had a stem cell transplant which gave me three years of remission. Since relapsing in 2003, I have been able to keep the myeloma under control by taking oral drugs, but my current therapy is losing its effectiveness, so I expect to add a newly approved IV drug next month.

Much progress has been made in treating multiple myeloma over the past ten years, but there is still no cure. Four new drugs have been approved in the past year, and the average life expectancy is up to about 6-8 years. But the most effective treatments for multiple myeloma still consist of a combination of oral and IV drugs.

As a member of myeloma support groups in Metro Detroit, Flint and Ann Arbor, I am here today to speak on behalf of my fellow myeloma patients. Each patient's cancer is a little different and their response to therapy is different, so our doctors have to tailor our treatment to what works best for that individual.

21 capsules of the Revlimid I have been taking every 28 days for the past ten years costs about \$8500. I could not afford to take it if my insurance did not cover it. For my fellow patients who do not have prescription drug coverage included in the health insurance, I urge you to pass this bill to ensure that doctors are able to prescribe the most effective treatments for their patients and those patients can afford to take them. How long we live and our quality of life should not be dependent on whether the best option for treating our cancer happens to be an oral drug or an IV or injectible drug.

Personally, I like the convenience of taking my therapy at home or on the road to driving over an hour to the clinic for every treatment, and I don't see how it makes sense to pay for visits to the clinic and deny coverage of oral therapy at home. I urge you to pass this bill.

I would be happy to answer any questions you may have for me.